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PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.					
First Inventor	SALVATORE CIRAMI				
Title	BINDCUCORDER	70			
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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450						97 J
See MPEP chapter 600 concerning utility patent application contents.  1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.  3. Specification [Total Pages 27] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [Total Sheets 2]  5. Oath or Declaration [Total Sheets 2]  5. Oath or Declaration [Total Sheets 2]  6. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)  6. DELETION OF INVENTOR(S)  6. Signed statement attached deleting inventor(s) 6. name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).										
6. Application Data Sheet. See 37 CFR 1.76				(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17. Other:						
Specification folio Continu  Prior application inf For CONTINUATIO 5b. Is considered.	powing the title, or in the station formation:  ON OF DIVISIONAL a part of the disclosure.	n an Application  Divisional  Examiner  APPS only; The sure of the accor		7 CFR 1.76.	CIP) of pi  Art Ui  cation, from whi	rior application  nit:  ch an oath or  id is hereby ir	No.:	on is	supplied unde	г Вох
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Name	SALVAT	ORE CI	RAMI							
Address	12-21	<u>35 TH</u>	AVENUE,	APT. 4	<u> </u>				<del></del>	
City	LONG 15.	LAND C.	iry	State	NEW YOR	K	Zip Co	ode	11106-4	129
Country	U.	S. A.	Ť		718-706		Fax			
Name (Print/Type		ATORE		Registrati	on No. (Attorne	ey/Agent)				
Signature	La	listore .	Cisami				Date	02	-02-0	4

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL	App	ication Number				
f EV/ 0004		g Date				
□ for FY 2004		Named Inventor	SALVATORE CIRA	MI		
Effective 10/01/2003. Patent fees are subject to annual revision.		miner Name	JACTHION E			
Applicant claims small entity status. See 37 CFR 1.27	Art					
TOTAL AMOUNT OF PAYMENT (\$)		mey Docket No.				
	71110		ALCULATION (continued)			
METHOD OF PAYMENT (check all that apply)			ALCULATION (continued)			
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The Director is authorized to: (check all that apply)	1053 130 1812 2,520	1	<ul> <li>English specification</li> <li>Filing a request for ex parte reexamination</li> </ul>			
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1. BASIC FILING FEE	1252 420	2252 210 Exte	ension for reply within second month			
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Extra Claims below Fee Paid	1502 480	2502 240 Des	sign issue fee			
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Claims -3 -	1460 130		titions to the Commissioner			
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Fee Fee Fee Fee <u>Fee Description</u>	1806 180	Poo	emission of Information Disclosure Stmt cording each patent assignment per			
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1204 86 2204 43 ** Reissue independent claims		exa	mined (37 CFR 1.129(b))			
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1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1002 30	1802 900 1802 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) -0- Other fee (specify)						
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						

SUBMITTED BY (Complete (if applicable))					
Name (Print/Type)	SALVATORE	CIRAMI	Registration No. (Attorney/Agent)	Telephone	718-706-6157
Signature	Salvatore	Ciromi		Date	02-02-04

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